

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	UD	45	5/14
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	22		8-1-01

INDEX OF CLAIMS

☒ Rejected
☒ Allowed
☒ (Through numeral)... Canceled
☒ Restricted
☐ Non-elected
☐ Interference
☐ Appeal
☐ Objected

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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